PTO/SB/22 (10-07)
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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Docket Number (Optional) 0879-0286P | | |
|--|---------------------|--|------------------|--|
| | | | | pplication Number 09/708,081-Conf. #9588 |
| For CAMERA USING CONDUCTIVE CAMERA ELEMENT AS RADIO ANTENNA | | | | |
| Art Unit 2622 | | Examiner | G. V. Selby | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | |
| X One month (37 CFR 1.17(a)(1)) | <u>Fee</u> \$120 | Small Entity Fee \$60 | \$ 120.00 | |
| Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ | |
| Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ | |
| Four months (37 CFR 1.17(a)(4)) | \$ 1640 | \$820 | \$ | |
| Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ | |
| Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number 40,439 attorney or agent under 37 CFR 1.34. Registration humber if acting under 37 CFR 1.34 | | | | |
| Signature | | October 25, 2007 Date | | |
| D. Richard Anderson | | (703) 205-8035 | | |
| Typed or printed name | | · | Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | |
| Total of 1 forms are submitted. | | | | |